

| Acct #: | |
|-----------|--|
| Promo ID: | |
| CSR ID: | |

Directions: Please complete and sign this application or go to www.mygoodtogo.com to open a new account.

| 1. *Personal Info | rmation | | | | | <u> </u> | *Ind | icates re | quired | fields | | |
|--|---|---|-------------------------------|---------------------------|---------------|------------------------------------|--|------------------|---------|--------|--|--|
| *Last Name: | | | *First Name: | | | | Middle Initial: | | | | | |
| Company/Agency Nar | me: | State Ager | ncy Code: (4 digits) | le: (4 digits) Job Title: | | | | | | | | |
| *Mailing Address: | | | | *Ci | *City: *State | | | *Zip Code: | | | | |
| Shipping Address (If different than Mailing Address): | | | | *City: | | | *State: | | *Zip Co | ode: | | |
| *Daytime Phone: | | Evening P | Evening Phone: *Email Address | | | | | | s: | | | |
| Alternate Contact: | | Daytime P | Daytime Phone: | | | | Email Address: | | | | | |
| 2. *Account Selection | | | | | | | | | | | | |
| Registered Pass Account Pay By Plate Account** | | | | | | | | | | | | |
| Commercial Accou | Commercial Account Short-Term Account** | | | | | | | | | | | |
| Government/Trans | sit Pass Account | | **Not valid for | trav | el on SR16 | 7 HOT Lanes | as a so | lo driver | | | | |
| | | | **Not valid for | trav | el on I-405 | ETL as an HC | V/carpo | ooler | | | | |
| *Account Statement Delivery Methods: E-Mail USPS *No Delivery Frequency: Monthly Quarterly | | | | | | | | | | | | |
| There is no charge for Account statements received via email or viewed online at www.wsdot.wa.gov/goodtogo. Fees | | | | | | | | | | | | |
| apply for statements mailed via U.S. Postal Service (See Terms and Conditions). 3. Good To Go! Pass Information | | | | | | | | | | | | |
| | | | nce and will be cha | rgeo | d when the | account is est | ablished | d. The co | nst | | | |
| The cost of the Pass is not included in the opening balance and will be charged when the account is established. The cost (excluding sales tax) and descriptions of the Passes are: | | | | | | | | | | | | |
| *\$5 <u>Sticker Pass</u> - Internal mount Pass | | | | - | | | | | | | | |
| is charged in all WA toll lanes windscreen Required for t \$12 License Plate Pass - Screw mount \$15 Flex Pass - Mounts in | | | | | | | bject to change. Please refer to rms and Conditions for details. | | | | | |
| Pass is charged in all | | 5 <u>Flex Pass</u> - Mounts internally with Velcro commended for SR 167 HOT Lanes | | | | *Permanent Pass - see installation | | | | | | |
| Required for HOV/carpoo | | | OV/carpool on I-40 | 405 ETL instuctions | | | | | | | | |
| 4. *Vehicle Information | | | | | | | | | | | | |
| Please list all of the vehicles that will be associated with this account. Please indicate the type of Pass needed for the vehicle, if necessary. Please attach a separate sheet listing additional vehicles if necessary. Note: For specialized license plates, be sure to record all letters and numbers on the plate. (Ex. University of Washington plate is entered as "W12345"; the Gonzaga plate is entered as "GU12345"; and the Square Dancing is entered as "12345SD".) | | | | | | | | | | | | |
| License Plate | State \ | ehicle Make | Vehicle Mo | del | I Year | To (| | a Pass duct N | | Qty | | |
| | | | | | | | | | | | | |
| | | | | - | | | | | | | | |
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| | | | | - | | | | | | | | |
| | | Please con | nplete application c | n re | verse side | | | | | | | |

| 5. *Account Opening Pre-Paid Balance, Replenishment Information | on and Amounts | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| Please select your Opening Pre-paid balance and Replenishment Level. | | | | | | | | | |
| A minimum of \$30 is required. The cost of Pass(es) and sales tax are in addition to the payment is sufficient to cover the cost of your Passes plus applicable sales tax. The c will be deducted from your <i>Good To Go!</i> account at the time your order is fulfilled. | | | | | | | | | |
| \$30 or \$ (Other amount greater than \$30) | \$30 or \$ (Other amount greater than \$30) | | | | | | | | |
| The Low Balance amount is automatically set to \$8. To increase your Low Balance an | mount please enter the new amount desired | | | | | | | | |
| \$ (Amount greater than \$8) | | | | | | | | | |
| 6. *Replenishment Methods | | | | | | | | | |
| Option 1- Automatic Replenishment by Credit Card gives Good To Go! the au prepaid balance falls below the Low Balance amount. You may increase the amount option is selected, you must supply credit card information below when mailing of | ount if more toll usage is anticipated. If this | | | | | | | | |
| Credit/Branded Debit Card (with logo): (Select one) Visa MasterC | Card Discover American Express | | | | | | | | |
| Expiration Date (mm/yy): | | | | | | | | | |
| Name as it appears on your card: | | | | | | | | | |
| Option 2- Automatic Replenishment by Electronic Check (ACH) gives Good To account twice a month on the dates and the amount you have selected. On those up to the dollar amount selected. You may increase the amount if more toll usage must supply your bank information. Note: Should you run out of funds prior to the replenishment date, the account you dates you have selected. To add funds to the account prior to the selected date of Customer Service. Auto Please complete the Electronic Check (ACH) suppled at one of our Walk in Centers or online at: www.wsdc Option 3- Manual Replenishment requires you to monitor your account and make below the Low Balance amount. Note: Tolls cannot post to an account with insufficient funds and toll bills will get | se specified dates, your account will be brought ge is anticipated. If this option is selected, you will not automatically replenish until the or change your replenishment amount, contact emental Authorization form. This form is available ot.wa.gov/goodtogo/payment-options take payment when your pre-paid balance falls | | | | | | | | |
| 7. *Payment Method | enerate. | | | | | | | | |
| To purchase selected Pass(es) and the Account Opening Pre-Paid Balance: To use the selected Credit/Branded Debit Card (with logo) payment method listed To use a different Credit/Branded Debit Card (with logo) payment: (Select one) | xpiration Date (mm/yy): | | | | | | | | |
| Cash (Do Not Mail) Check (sign and date) Money Order (Make Check or Money Order payable to: Good to Go!) | | | | | | | | | |
| 8. *Authorization | | | | | | | | | |
| With this signature I agree to the following: (1) I authorize <i>Good To Go!</i> to charge the for Passes, the specified Opening Account Balance, and/or Automatic Replenishment of this Agreement that I will receive with my <i>Good To Go!</i> Pass package. Terms and C wsdot.wa.gov/goodtogo; (3) By using a <i>Good To Go!</i> Account, I will be agreeing to the information contained in this application is true and accurate. | ts; (2) I agree to read the Terms and Conditions Conditions are also available online at www. | | | | | | | | |
| Walk-in Customer Service Centers | Online: www. wsdot.wa.gov/goodtogo | | | | | | | | |
| Seattle: University Center, 4554 9th Avenue NE Suite 100, Seattle, WA 98105 Bellevue: 13107 NE 20th St., Suites 3 & 4, Bellevue, WA 98005 Gig Harbor: 3212 50th St. Court NW, Suite 200, Gig Harbor, WA 98335 | Call Fax 1-866-936-8246 206-547-0496 Mail To: Good To Go! P.O. Box 300321 Seattle, WA 98103 | | | | | | | | |

DO NOT SEND CASH